

OAHU CANDIDATES-
SUBMIT 1 ORIGINAL AND 1 COPY

NEIGHBOR ISLAND CANDIDATES-
SUBMIT 1 ORIGINAL AND 2 COPIES

STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION

DISCLOSURE REPORT
CANDIDATE COMMITTEE

COPY

PLEASE TYPE OR PRINT CLEARLY WITH INK (INSTRUCTIONS FOR COMPLETING THE DISCLOSURE REPORT CAN BE FOUND IN THE "GUIDEBOOK FOR CANDIDATE COMMITTEES.")

SECTION I-CANDIDATE AND CANDIDATE COMMITTEE:

(a) Candidate Name:

Dennis A. Arakaki

(b) Committee Name: Friends of Dennis Arakaki

(c) Mailing Address: 3046 Uaawa Place

(d) Phone (Bus) 841-7022 (Res) 841-4191

Treasurer's

SECTION II-TYPE OF REPORT:

(See the Schedule of Reporting Dates to complete this section)

- ☐ 1st Preliminary Primary ☒ Amended ☒ First ☐ Third
☐ 2nd Preliminary Primary ☐ Second ☐ Fourth
☐ Final Primary ☐ Short Form¹
☐ Preliminary General
☐ Final Election Period
☒ Supplemental


REPORTING PERIOD

Nov. 3, 04 through Dec. 31, 04

SECTION III-SUMMARY OF RECEIPTS AND DISBURSEMENTS
(Complete Section IV on the Back of this Form Before Completing This Section)

	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD ² TOTAL TO DATE
1. Cash on Hand at the Beginning of the Election Period ²		\$ 4,076.76
2. Cash on Hand at the Beginning of this Reporting Period.....	\$ 4,763.97	
3. Total Receipts (From Line 15).....	\$ -0-	\$ 42,990.00
4. Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B).....	\$ 4,763.97	\$ 47,066.76
5. Total Disbursements (not including Unpaid Expenditures) (From Line 19).....	\$ 4,705.45	\$ 47,008.24
6. Cash on Hand at the Closing of this Reporting Period (Subtract Line 5 from Line 4)....	\$ 58.52	\$ 58.52
7. Total Loans at the Closing of this Reporting Period.....	\$ 60.00	
8. Total Unpaid Expenditures at the Closing of this Reporting Period.....	-0-	
9. Debts Owed at the Closing of this Reporting Period (Add Lines 7 and 8).....	\$ 60.00	
10. Surplus/Deficit (Subtract Line 9 from Line 6).....	\$ -1.48	

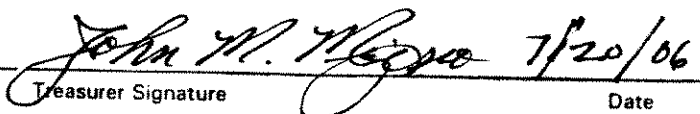
I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge.



Candidate Signature

7/20/06

Date

 7/20/06

Treasurer Signature

Date

¹ Short Form is checked if the candidate is filing a Preliminary, Final or Supplemental Report and has aggregate contributions and aggregate expenditures for the reporting period totaling \$2,000 or less.
² Short form reporting requires completion of only Section I, Section II, and Section III of this Disclosure Report.
An Election Period is the two-year period between general election days if a candidate is seeking nomination or election to a two-year office and the four-year period between general election days if a candidate is seeking nomination or election to a four-year office.

SECTION IV-DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS
(If Necessary, Complete Schedules A through E Before Completing This Section)

RECEIPTS

COLUMN A
TOTAL THIS PERIOD

COLUMN B
ELECTION PERIOD
TOTAL TO DATE

11. Contributions From:			11
(a) Individuals/Other Entities/Noncandidate Committees/Political Parties			11(a)
(i) Monetary and Non-Monetary Contributions of \$100 or Less.....	-0-	\$ 30,340.00	11(a)(i)
(ii) Monetary and Non-Monetary Contributions of More Than \$100.....	-0-	\$ 12,650.00	11(a)(ii)
(iii) Subtotal (Add Lines 11(a)(i) and 11(a)(ii)).....	-0-	\$ 42,990.00	11(a)(iii)
(b) Candidate or Candidate's Immediate Family			11(b)
(i) Monetary and Non-Monetary Contributions of \$100 or Less.....	-0-	-0-	11(b)(i)
(ii) Monetary and Non-Monetary Contributions of More Than \$100.....	-0-	-0-	11(b)(ii)
(iii) Subtotal (Add Lines 11(b)(i) and 11(b)(ii)).....	-0-	-0-	11(b)(iii)
12. Total Contributions (Add Lines 11(a)(iii) and 11(b)(iii)).....	-0-	\$ 42,990.00	12
13. Public Funds and Other Receipts.....	-0-	-0-	13
14. Loans.....	-0-	-0-	14
15. Total Receipts (Add Lines 12 through 14).....	-0-	\$ 42,990.00	15
DISBURSEMENTS			
16. Expenditures.....	\$ 3,705.45	\$ 43,108.24	16
17. Loans Repaid or Forgiven.....	\$ 1,000.00	\$ 3,900.00	17
18. Unpaid Expenditures Paid or Forgiven.....	-0-	-0-	18
19. Subtotal Disbursements (Add Lines 16 through 18).....	\$ 4,705.45	\$ 47,008.24	19
20. Unpaid Expenditures.....	-0-		20
21. Total Disbursements (Add Lines 19 and 20).....	\$ 4,705.45	\$ 47,008.24	21

OAHU CANDIDATES-
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STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

DISCLOSURE REPORT CANDIDATE COMMITTEE

PLEASE TYPE OR PRINT CLEARLY WITH INK (INSTRUCTIONS FOR COMPLETING THE DISCLOSURE REPORT CAN BE FOUND IN THE "GUIDEBOOK FOR CANDIDATE COMMITTEES.")

SECTION I-CANDIDATE AND CANDIDATE COMMITTEE:

(a) Candidate Name:

Dennis A. Arakaki

(b) Committee Name: Friends of Dennis Arakaki

(c) Mailing Address:

3046 Uaawa Place

Honolulu, Hawaii 96819

(d) Phone (Bus) 741-4501 (Res) 841-4191

Treasurer's

SECTION II-TYPE OF REPORT:

(See the Schedule of Reporting Dates to complete this section)

- ☐ 1st Preliminary Primary ☐ Amended ☐ First ☐ Third
- ☐ 2nd Preliminary Primary ☐ Short Form ¹ ☐ Second ☐ Fourth
- ☐ Final Primary
- ☐ Preliminary General
- ☐ Final Election Period
- ☒ Supplemental

REPORTING PERIOD

11-3-04 through 12-31-04

SECTION III-SUMMARY OF RECEIPTS AND DISBURSEMENTS (Complete Section IV on the Back of this Form Before Completing This Section)

	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD ² TOTAL TO DATE
1. Cash on Hand at the Beginning of the Election Period ²		4,076.76 4,076.00
2. Cash on Hand at the Beginning of this Reporting Period.....	4,763.47 6,961.69	
3. Total Receipts (From Line 15).....	0	42,490.00 43,040.00
4. Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B).....	4,763.47 6,961.69	47,116.00
5. Total Disbursements (not including Unpaid Expenditures) (From Line 19).....	4,705.45	47,008.24 48,907.24
6. Cash on Hand at the Closing of this Reporting Period (Subtract Line 5 from Line 4)....	58.52 2,256.24	58.52 -1,791.24
7. Total Loans at the Closing of this Reporting Period.....	60.00	
8. Total Unpaid Expenditures at the Closing of this Reporting Period.....	0	
9. Debts Owed at the Closing of this Reporting Period (Add Lines 7 and 8).....	60.00	
10. Surplus/Deficit (Subtract Line 9 from Line 6).....	- \$1.48 2,196.24	

I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge.

Dennis A. Arakaki

Candidate Signature

1-28-05

Date

John M. Higgins

Treasurer Signature

1-28-05

Date

¹ Short Form is checked if the candidate is filing a Preliminary, Final or Supplemental Report and has aggregate contributions and aggregate expenditures for the reporting period totaling \$2,000 or less.

² An Election Period is the two-year period between general election days if a candidate is seeking nomination or election to a two-year office and the four-year period between general election days if a candidate is seeking nomination or election to a four-year office.

SECTION IV-DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS
(If Necessary, Complete Schedules A through E Before Completing This Section)

RECEIPTS	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD TOTAL TO DATE	
11. Contributions From:			11
(a) Individuals/Other Entities/Noncandidate Committees/Political Parties			11(a)
(i) Monetary and Non-Monetary Contributions of \$100 or Less.....	0	30,340.00 30,330.00	11(a)(i)
(ii) Monetary and Non-Monetary Contributions of More Than \$100.....	0	12,650.00	11(a)(ii)
(iii) Subtotal (Add Lines 11(a)(i) and 11(a)(ii)).....	0	42,990.00 42,980.00	11(a)(iii)
(b) Candidate or Candidate's Immediate Family			11(b)
(i) Monetary and Non-Monetary Contributions of \$100 or Less.....	-	-	11(b)(i)
(ii) Monetary and Non-Monetary Contributions of More Than \$100.....	-	-	11(b)(ii)
(iii) Subtotal (Add Lines 11(b)(i) and 11(b)(ii)).....	-	-	11(b)(iii)
12. Total Contributions (Add Lines 11(a)(iii) and 11(b)(iii)).....	0	42,990.00 42,980.00	12
13. Public Funds and Other Receipts.....	-	-	13
14. Loans.....	0	60.00	14
15. Total Receipts (Add Lines 12 through 14).....	0	42,990.00 43,040.00	15
DISBURSEMENTS			
16. Expenditures.....	3,705.45	43,108.24 45,007.24	16
17. Loans Repaid or Forgiven.....	1,000.00	3,900.00	17
18. Unpaid Expenditures Paid or Forgiven.....	0	0	18
19. Subtotal Disbursements (Add Lines 16 through 18).....	4,705.45	47,008.24 48,907.24	19
20. Unpaid Expenditures.....	0		20
21. Total Disbursements (Add Lines 19 and 20).....	4,705.45	47,008.24 48,907.24	21

CHECK ONLY ONE BOX
USE SEPARATE SCHEDULE(S) FOR EACH CATEGORY BELOW

☐ INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES/POLITICAL PARTIES

☐ CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION

SCHEDULE A
MONETARY AND NON-MONETARY CONTRIBUTIONS
CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

Friends of Dennis Arakaki

PAGE 1 OF 1

DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....			0	
2. TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total to the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(ii)).....			0	

Form CC-5(A) (Rev. 5/99)

With the exception of loans and unpaid expenditures that are forgiven, non-monetary contributions must also be reported as an "Expenditure" on Schedule B.

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

Friends of Dennis Arakaki

PAGE 1 OF 5

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
11-3-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Office Max 94-861 Lumiania St. Waikale, HI 96797	4 in one printer for campaign PC	\$520.78
11-4-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Akyth Inc. P.O. Box 735 Hon., HI 96808	Purchase 40 bentos for election day volunteers	\$107.60
11-4-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Pacific T-Shirt Co. 95-1509 Ainamoku Mililani, HI 96789	Printing campaign T-shirts for volunteers	\$211.46
11-4-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Fil-Am Courier 2119 N. King St., #306 Hon., HI 96817	Joint Ad for General Election	\$150.39
11-5-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Alliance for Drama Education 1564 N. King St. Hon., HI 96817	Donation T-Shirt Theater	\$25.00
11-6-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Tribute to Mayor Harris c/o Vergel Adonis	Dinner at Fil Com Center	\$35.00
11-8-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION University of Hawaii Foundation 2444 Dole St. Bachman Hon., HI 96822	Pledge to school of Nursing, UH Manoa	\$100.00

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page).....	\$1,150.23
2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report).....	

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 2 OF 5

Friends of Dennis Arakaki

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR-MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
11-19-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Oceanic Time Warner Cable 200 Akamanui St. Mililani, HI 96789	ISP for Campaign computer	\$44.95
11-23-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Mental Health Assn, 200 N. Vineyard Blvd. #300 Hon., HI 96817	Membership & Donation	\$103.00
11-30-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION American T-Shirt Co. 1217 N. King St. Hon., HI 96817	Sponsor Volleyball Tournament for Kalihi Schools	\$256.21
12-1-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Star Markets 1620 N. School St. Hon., HI 96819	Sponsor community lunch on obesity issues	\$58.05
12-3-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Kamehameha Bakery 1339 N. School St. Hon., HI 96817	Donate sheet cake for Kalihi Uka Booster Club Christmas Party	\$33.28
12-13-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Foodland 414 N. School St. Hon., HI 96817	Donate door prize	\$30.00
12-18-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Kamehameha Bakery 1339 N. School St. Hon., HI 96817	Donate sheet cake for Kalihi Valley Homes' Resident Christmas Party	\$33.28
1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page).....			\$558.77
2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report).....			

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:
Friends of Dennis Arakaki

PAGE 3 OF 5

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR-MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
11-8-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Sandra Rosso 46-461 Kuneki St. Kaneohe, HI 96744	Retirement tribute to Naomi Carter	\$30.00
11-14-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Dennis Arakaki	Repayment of personal loan	\$1,000.00
11-15-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION COMP USA 604 Ala Moana Blvd. Hon., HI 96813	Repair of campaign computer	\$124.97
11-15-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Affordable Housing & Homeless Alliance 2229 N. School St., Suite 207 Hon., HI 96817	Donation Forum	\$26.00
11-17-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Verizon Wireless 1177 Bishop St. Hon., HI 96813	Cell phone charge for campaign	\$77.41
11-18-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Akyth Inc. P.O. Box 735 Hon., HI 96808	Host lunch for community meeting	\$41.71
11-18-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Kalihi Business Assoc. P.O. Box 17729 Hon., HI 96819	Donation to annual Christmas parade	\$50.00

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page).....	\$1,350.09
2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report).....	

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

Friends of Dennis Arakaki

PAGE 4 OF 5

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR-MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
12-20-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Oceanic Time Warner Cable 200 Akamainui St. Mililani, HI 96789	ISP for campaign computer	\$44.95
12-22-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Kamehameha Bakery 1339 N. School St. Honolulu, HI 96817	Donate sheet cake Mayor Wright Homes Christmas Celebration	\$33.28
12-23-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Office Depot 1505 Dillingham Blvd. Hon., HI 96817	Office supplies for campaign	\$43.50
12-29-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION COSTCO Iwilei Rd. Hon., HI 96817	Purchase certificate frames and coffee for meetings	\$56.51
12-29-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Ala Moana Shopping Center 1450 Ala Moana Blvd. Hon., HI 96815	Christmas gifts for campaign co-chairs & co-treasurers	\$202.00
12-30-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION NSN Hawaii 255 Sand Island Access Road Hon., HI 96819	Silkscreen	27.64
12-30-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Doug Chun Designs 2115 N. School St. Hon., HI 96819	Art prep & positive film for silkscreen	\$38.48

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page)..... \$446.36

2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report).....

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

Friends of Dennis Arakaki

PAGE 5 OF 5

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR-MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
12-30-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION YMCA of Honolulu P.O. Box 1921 Hon., HI 96805	Annual Pledge	\$100.00
12-30-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION NSN Hawaii 255 Sand Island Access Road Hon., HI 96819	Print T-Shirts for Volleyball Tournament for Kalihi Schols 5th graders	\$100.00
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page).....	\$200.00
2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report).....	\$3,705.45

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**


**SCHEDULE C
PUBLIC FUNDS AND OTHER RECEIPTS
CANDIDATE COMMITTEE**

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 1 OF 1

Friends of Dennis Arakaki

DATE OF DEPOSIT	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF SOURCE OF PUBLIC FUNDS OR OTHER RECEIPT	DESCRIPTION OF OTHER RECEIPT	AMOUNT OF PUBLIC FUNDS OR OTHER RECEIPT THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
1. SUBTOTAL OF PUBLIC FUNDS AND OTHER RECEIPTS THIS PERIOD (This Page).....			0	
2. TOTAL PUBLIC FUNDS AND OTHER RECEIPTS THIS PERIOD (Last Page Only) (Transfer total to Line Number 13 of the Disclosure Report).....			0	

ATTACH A COPY OF THE
EXECUTED LOAN DOCUMENT AT
THE TIME OF INITIAL DISCLOSURE

STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION

SCHEDULE D
LOANS
CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 1 OF 1

Friends of Dennis Arakaki

LOAN SOURCE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF LENDER NAME OF EMPLOYER AND OCCUPATION	AMOUNT OF LOAN AT BEGINNING OF THIS PERIOD	NEW LOAN AMOUNT THIS PERIOD	AMOUNT REPAID OR FORGIVEN THIS PERIOD	AMOUNT OF LOAN AT CLOSING OF THIS PERIOD
DATE OF LOAN	PURPOSE OF LOAN				
<input checked="" type="checkbox"/> CANDIDATE <input type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER		1,060.00	1,000.00	<input type="checkbox"/> FORGIVEN	
<input type="checkbox"/> CANDIDATE <input type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER				<input type="checkbox"/> FORGIVEN	
<input type="checkbox"/> CANDIDATE <input type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER				<input type="checkbox"/> FORGIVEN	
<input type="checkbox"/> CANDIDATE <input type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER				<input type="checkbox"/> FORGIVEN	
<input type="checkbox"/> CANDIDATE <input type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER				<input type="checkbox"/> FORGIVEN	
<input type="checkbox"/> CANDIDATE <input type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER				<input type="checkbox"/> FORGIVEN	
1. SUBTOTAL (This Page).....			1,060.00		
2. TOTAL NEW LOANS THIS PERIOD (Last Page Only) (Transfer total to Line Number 14 of the Disclosure Report).....			0		
3. TOTAL LOANS REPAID OR FORGIVEN THIS PERIOD (Last Page Only) (Transfer total to Line Number 17 of the Disclosure Report).....				1,000.00	
4. TOTAL LOANS AT THE CLOSING OF THIS PERIOD (Last Page Only) (Transfer total to Line Number 7 of the Disclosure Report)....					60.00

Form CC-5(D) (Rev. 5/99)

If a loan is forgiven, the loan must also be reported as a "Non-Monetary Contribution" on Schedule A. The forgiven loan does not have to be reported as an "Expenditure" on Schedule B.

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE E
UNPAID EXPENDITURES
CANDIDATE COMMITTEE**

NOTE: EXPENDITURES ARE CONSIDERED MADE WHEN THE PRODUCT IS DELIVERED OR THE SERVICE IS RENDERED (ACCRUAL METHOD OF ACCOUNTING).

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 1 OF 1

Friends of Dennis Arakaki

DATE OF UNPAID EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR	AMOUNT OF UNPAID EXPENDITURE AT BEGINNING OF THIS PERIOD	NEW UNPAID EXPENDITURE AMOUNT THIS PERIOD	AMOUNT PAID OR FORGIVEN THIS PERIOD	AMOUNT OF UNPAID EXPENDITURE AT CLOSING OF THIS PERIOD
	PURPOSE OF UNPAID EXPENDITURE				
				<input type="checkbox"/> FORGIVEN	
				<input type="checkbox"/> FORGIVEN	
				<input type="checkbox"/> FORGIVEN	
				<input type="checkbox"/> FORGIVEN	
				<input type="checkbox"/> FORGIVEN	
1. SUBTOTAL (This Page).....			0		
2. TOTAL NEW UNPAID EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 20 of the Disclosure Report).....			0		
3. TOTAL UNPAID EXPENDITURES PAID OR FORGIVEN THIS PERIOD (Last Page Only) (Transfer total to Line Number 18 of the Disclosure Report).....				0	
4. TOTAL UNPAID EXPENDITURES AT THE CLOSING OF THIS PERIOD (Last Page Only) (Transfer total to Line Number 8 of the Disclosure Report).....					0

Form CC-5(E) (Rev. 5/99)

If an unpaid expenditure is forgiven, the unpaid expenditure must also be reported as a "Non-Monetary Contribution" on Schedule A. The forgiven unpaid expenditure does not have to be reported as an "Expenditure" on Schedule B.

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**ACQUISITION OF DURABLE ASSETS
CANDIDATE COMMITTEE**

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

Friends of Dennis Arakaki

ACQUISITION OF ASSETS

The purchase or lease of an asset must also be reported as an "Expenditure" on Schedule B.

DATE OF ACQUISITION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF VENDOR OR DONOR	DESCRIPTION OF ASSET	ACQUISITION COST OR FAIR MARKET VALUE OF ASSET
11-3-04	Office Max Waialele Center 94-861 Lumiaina St. Waialele, HI 96797	4 in one printer PSC-7410	\$520.78

All Durable Assets must be reported until all assets have been sold or disposed of accordingly.

**INSTRUCTIONS FOR COMPLETING THE
"ACQUISITION OF DURABLE ASSETS" FORM**

The "Acquisition of Durable Assets" Form is to be used to report the acquisition of durable assets. Generally, non-consumable supplies and equipment, defined by the department of accounting and general services to have a purchase value of at least \$250 and a useful life of twelve months or more, are to be reported in each subsequent reporting period as an asset of the campaign.

A completed "Acquisition of Durable Assets" Form must be filed with every report until the asset has been liquidated. Assets that are purchased or leased must also be reported as an "Expenditure" on Schedule B.

Acquisition Of Durable Assets

Date of Acquisition - Enter the date that the asset was purchased, leased or donated.

Full Name, Street Address, City, State and Zipcode of Vendor or Donor - Enter information for the vendor or donor, whichever is applicable.

Description of Asset - Enter a description of the asset.

Acquisition Cost or Value of Asset - Enter the acquisition cost or value of the asset. The fair market value is to be reported when an asset is donated to the campaign in the form of a nonmonetary contribution. For each subsequent reporting period, the asset should be reported at its initial cost or value.

Store 0277

From: as0277@officemax.com [as0277@officemax.com]
To: Store 0277
Cc:
Subject:
Attachments:

NOV 26, 2004
 07:17 PM

PAGE : 1

WAIKELE, HI
 Waikale Center Bldg. #9
 94-861 Lumiaina Street
 WAIKELE, HI 96797
 PHONE: (808)671-7337

ZONE : A

ORDER ANALYSIS REPORT

CATALOG: 0000
 SHIP TO:
 State Legislature
 3046 Uaawa Place

KEY CODE : ONLINE
 ORDER NUMBER: 96635466 STS: CN
 PO NUMBER :
 ORDER DATE : 11/11/04 04:16 PM
 SHIP DATE : 11/12/04
 SALESPERSON : BROADVISION

Honolulu, HI 96819

CUSTOMER ID : 106509890
 ORDER TYPE : OMX

HOME PHONE : (808)271-4905 ORIGINATION : 700
 BUSINESS PHONE: (808)271-4905 FI FILLMENT : 277
 O/S TAGGED : N

*Dennis**Arakaki***ORDER INFORMATION**

LINE#	UPC	PO #	QTY	QTY TX	PRICE	EXTD
		DLVD.	ORDERED	OVER	PRICE	STAT

1	829160502724	0	0	1 Y	499.98	499.98 CMP
	Q5569A#ABA			PSC 7410 All-In-One		Disc: 11.72
2	400208626482	0	0	1 N	12.00	12.00 CMP
	T-SHIRT			Free Rubberband Man T-Shirt		Disc: 0.28

12257445 12.00

PAYMENT INFORMATION

DESC	PMT TYPE	CREDIT CARD#/CHECK#	AMOUNT TO P.
PROMISED	VS	*****6880	519.51 0.00

SUMMARY INFORMATION

TOTAL DISCOUNTS : \$12.00
 MERCHANDISE TOTAL : \$511.98
 ASSEMBLY TOTAL : \$0.00
 DELIVERY TOTAL : \$0.00
 TAX TOTAL : \$19.53
 ORDER TOTAL : \$519.51
 BALANCE DUE : \$7.53

OfficeMax

OfficeMax #277
 94-861 LUMIAINA STREET
 WAIPAHU, HI. 96797
 (808) 671-7337

Tell us about your shopping experience
 and enter to win 1 of 5 prizes at
www.officemax.com/store/survey

829160502724 \$499.98
 PSC 7410 All-In-One
 Rebate Item

SubTotal \$499.98
 Tax 4.160% \$20.80
 TOTAL \$520.78

VISA \$520.78
 Card number: XXXXXXXXXXXX6880
 Authorization 004607

For MaxAssurance Questions or
 Concerns Call 1-866-805-9095

31944556
 0277 00005 14448 8 11/26/04
 00180853 02:45:43 PM

ORDER BY PHONE 1-877-OFFICEMAX

